

#### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

assistance in completing this form, see instructions on the reverse side.

(CFA-4)

Summary	Sheet
AND RESIDENCE AND ADDRESS OF THE PERSON NAMED IN COLUMN 2 IN CO.	The second secon

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

IS THIS AN AMENDMENT? Yes No	100 7 200 100 1	es alebero	3
COMMITTEE INFORMATION	redem Hammer selver	edigerali kanyayang	<b>外州时间为</b> 有的国际基本指令。
Full Name of Committee (as on Statement of Organization)      Check if this is a new	name		
JAN LUGER FOR CLERK TREASURER	OHA L MACHO	144.0	
Acronym or Abbreviated Name (if any)	3. Committee Te	elephone Number	
	( )		
4. Mailing Address (address where all campaign finance correspondence is received)	Check if this is a ne	w address	6.103
5. City, State, ZIP Code	6. Party Affiliation	n (if applicable)	
CICERO 1 IN 46034	+		
CANDIDATE INFORMATION (For Candidate's			an a sa ngang tao tao tao tao
7. Full Name of Candidate (include any nickname)	8. Party Affiliation	on or If Independen	t Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County of R	11	
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Conv	ention
Final/Disbands Committee (lines 18, 19, and 20 must be "0") U Outgoing Treasurer (within 10 days amend Statement	of Organization)	Post-Con	vention
12 Reporting Period:	and the	OLUMN A	COLUMN B
From: 10-13-2007 Through: 12-31-2007	, , , , , T	his Period	<sub>unit</sub> Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	A STATE OF THE STA	0	s teporting period 4:3
14. Cash on hand and investments January 1, current year.		idat/districts of the	0
GONTRIBUTIONS AND RECEIPTS	erakan jejota	<b>对信息型的信托</b> 等	
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)	The state of the s	physiologis quical	67 115
15a. Itemized (use Schedule A)	8	7,45	81,45
15b. Unitemized			
Tot. Add lifes Tot and Total Sources and	BTOTAL	7	05115
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL 8	(, 4 S	X 1, 4 5
(Note: These amounts include in-kind expenditures and loan repayments.)	io igno.	einenciules and i	en recovered solvery.
17a, Itemized (use Schedule B) (Public Question: use Schedule C)	8	7,45	87,45
17b. Unitemized	A stable to tree	ingeter lead U	
17c. Add lines 17a and 17b in both columns SU	JBTOTAL &	7,48 =	I III Section 1
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	E 6 5	(O) p technical
19. Debts OWED BY the committee (use Schedule D)		0 1	in a supplied
20. Debts OWED TO the committee (use Schedule E)		0 0	**************************************
		S94.05/385X	OR OFFICE USE ONLY
CERTIFICATION  LOSEDTEV THAT I HAVE SYMMED THIS STATEMENT TO THE REST OF MY KNOWLEDGE AND RELIEF IT IS	CANCEL CORRECT AN	D COMPLETE.	OK OTTIOE USE ONE!
STATEMENT TO THE REST OF MY KNOWLEDGE AND BELIEF IT IS  STATEMENT TO THE REST OF MY KNOWLEDGE AND BELIEF IT IS  STATEMENT OF FILE  TILLS  THE TOTAL PROPERTY OF THE PROPERTY O	Date	8 1, 7	
heosure/Candi	1 1 1 1 1	20-07 8	and Market
	Date	70-67	

or sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly erson who fails to file a complete or accurate report as required by the Indiana and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)



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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

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Page _	2	of	5	

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	AMOUNT THIS		RECEIVED BY
1. LARRY E. LINSET 617 CORAL CH	Contributions: Direct In-Kind (describe)	8		10-19-07
CICERO	Other Receipts: Interest Loan Misc. (specify)	87.45		Ju
Contributor's Occupation (if required)	_	- 1	ar success suggested	
2.	Contributions:  Direct In-Kind (describe)	e essocial il media	200	
	Other Receipts: Interest Loan Misc. (specify)	State Francisco	TUBINTAL S	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
Contributor's Occupation (if required)	OF THE RESIDENCE OF THE	E COLHIA SH	THURSDAY IS \$	Allega .
3.	Contributions:  Direct In-Kind (describe)	TAG-CTRABY BU	FALLERIC ES	
A simple of reference to the community of the community o	Other Receipts; Interest Loan Misc. (specify)	sey lateres do	o ta ho portes	5796
Contributor's Occupation (if required)				
	Contributions:  Direct In-Kind (describe)		Laboration of	
A STREET A S	Other Receipts:  Interest Loan  Misc. (specify)	1 20035418 TO 3 1 24 20 230 E 3 2 E	DA9 211-7 124 - 127 - 124 - 124	orana Interior
Contributor's Occupation (if required)	KO BOAS TEACHBELLION	CH SCHEDULE	BUAN LIA 15	38107
5.	Contributions:  Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)				
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### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

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## (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER					
Page	3	of	3		

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Discount Copies  Poo mensa Dr.  Noblesville IN46062	PRINTER	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	<sup>\$</sup> 87.45	\$87,45	16-19-07
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	2		
Code	TOUT OF THE STATE	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	o Atomical Sugar		
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAG	E OF SCHEDULE B	\$87, 45		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON TH	E LAST PAGE ONLY	\$ 87,45	es in automi.	ita i distributi